

KSFHP Advisory Council Meeting
Minutes
Oct 23, 2006

Cyndi welcomed our participants. Patrice Thompson, Jenny Tavares, Doris Tompkins, Matina Tosima and Tina Guenther were in attendance. Cyndi welcomed Matinte Tosima and thanked her for her agreement to be on the Advisory Group. Matinte is of Micronesian heritage and hails from Baxter Springs.

Cyndi ask if there were any additions or changes to the minutes from the last meeting. No one had any to make.

Cyndi opened the discussion by talking about the Five Year Competitive Grant that was just completed. The term "competitive" means that other agencies could also apply for the monies to provide service to Kansas's farmworkers. It does not appear that any other agency applied and we have confidence that KSFHP will be awarded the grant.

She reviewed the KSFHP Health Plan 2007 and asked for questions or comments.

PERINATAL

She began by explained that our focus will continue to be on pregnant women, prenatal and post partum care. Only 59% of all FW Women get care in the 1st trimester, whereas 86.5 % of other Kansas women begin care in the 1st trimester. We will continue to work on getting FW women into prenatal care early and directing our clients to the appropriate links such as WIC, Health Wave or Medicaid, and family planning following the baby's birth. Emphasis will be ongoing to encourage preventive care for healthy Mom, baby and family, well child checks & immunizations, which are vital.

PEDIATRIC & ADOLESCENT AND ADULT

The overall KSFHP health goal is to increase access to preventive; primary and specialty care services for FW families. FWs face many barriers and that is where the case managers and health promoters come in. An example of barriers that we must address is the new Medicaid requirement that U.S. citizens provide both identification and proof of citizenship. This has required that KSFHP staff become informed then educate and support FWs to meet the new requirements.

IMMUNIAZATIONS

Paula Rowden at Stevens Co Health Dept will be working with KSFHP on a project to begin to collect immunization information on FWs. This is a new requirement for KSFHP. We will look at recommended immunizations for up to

36 months, 13 years and working on establishing a baseline for influenza and pneumococcal vaccinations in appropriately aged clients. Patrice remarked that she recently had to get a tetanus shot and wondered if we will address this vaccine in the new efforts. Cyndi reported only for younger children where it is part of the recommended immunization schedule.

CHRONIC DISEASE

KSFHP clients are 55% Latino and at a higher risk for Diabetes. KSFHP will continue to focus on early diagnosis and then management of the disease through the Diabetes initiative. There have been two instances of KSFHP staff picking up on symptoms of diabetes in undiagnosed FWs so the initiative has had some positive results. Shirley Dinkle will continue to direct the diabetes initiative. The possibility of participation in a cardiovascular disease initiative has been discussed but manpower is an inhibiting factor. Patrice mentioned that people would be receiving cardio information if they were under care for diabetes, so KSFHP would still be doing work in this area.

KSFHP staff will begin to look for ways to market health and wellness to the FW population. The Harvest of Health booklets held to much information for our clients and were overwhelming to them. CM/HP's will work together to come up with suggestions on how to get the messages across in a more simplified format. Refrigerator magnets have received some discussion at this point. There is a feeling that we need more pictures, less words. Perhaps we should focus on *one* theme per year.

BEHAVIORAL HEALTH

Another new vehicle for interventions to build social networking and provide health education and support change are small group work. Elizabeth Harder, a short term volunteer health promoter help to start a small group of Low German women in Central Kansas who meet to sew and chat. These types of groups help with social isolation. Pat Fernandez and Cyndi Treaster will start a small group for Latina FW women in Allen Co. This group will work on issues of depression, anxiety and social isolation to name a few.

ORAL HEALTH

This will continue to also be a goal in the health plan. Access to dental care will continue to be provided but KSFHP staff wants to focus on preventative care, beginning in early childhood. The hope is that this could avert much of the serious dental decay seen in FW children and adults. This is one of the areas where simple, pictorial health and wellness education will be developed and delivered.

CLIENT SATISFACTION AND PROVIDER SURVEYS

KSFHP will begin to survey health providers in order to get feedback on how the program works for them and ideas on how to improve it. KSFHP staff compiles the Client Satisfaction Survey annually. The feedback we received this year from the survey indicated KSFHP clients are pleased with the services they receive. However we do need to continue to work on advising our clients as to where they can go to receive services when their clinic is closed. Also, Cyndi pointed out that most people still don't receive regular health care until they become ill. A new protocol for KSFHP staff and access points will be developed to address some of these issues. It will be utilized when clients are registered and reregistered annually. It will include informing FWs of the following:

1. Where their "medical home" is,
2. An understanding of the why and how of preventive care
3. Where to go if the clinic is closed and appropriate use of the emergency room.

Included in the KSFHP business plan is the need to find funding to repeat the health risk assessment survey completed in 2003 with Kansas farmworkers. In years when this survey is not done KSFHP staff will utilize focus groups from around the state to solicit ideas regarding the unmet needs of the FW population and feedback on KSFHP services.

NEWSLETTER

Cyndi spoke of the Newsletter, an idea that came out of the Strategic Planning Meetings last spring. KSFHP sends the newsletter out three times a year to all of our providers, approximately 700 +. In each newsletter KSFHP will emphasize particular themes such as prevention, diabetes, oral health, depression/anxiety and language accessibility. The newsletter will also remind our providers about timely submission of bills when the state and fiscal year ends. Patrice suggested we put a volume number plus the year and date on each newsletter and corrected a typo found on our previous newsletter. She also suggested that we might include success stories or brief discussions on pertinent problems.

Jenny asked if she could send the newsletter out to the job service centers. Cyndi said it would be very appropriate to do so.

Cyndi closed the meeting with a general request for comments or questions and a thank you to all for participating.